

VERIFICATION OF CALIBRATION REPORT

of DataMaster cdm Breath Test Instrument

State of Alaska

SEP 17 2009

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

Supervisor/Operator Performing the Verification Procedure:

DataMaster cdm S/N 130289 ✓

Name Byron D. Redburn ID# 2087 Date 9-4-09 ✓

A Agency Nome PD Phone # 443-5262

Instrument Location Nome PD ✓

B Alco S/N X301548 ✓ Target Value .079 ✓ High Pressure 600

Alco Test Values .078 ✓ .078 ✓
1st Alco 2nd Alco

Signature [Signature]

(OVER)

(Do Not write in the area below)

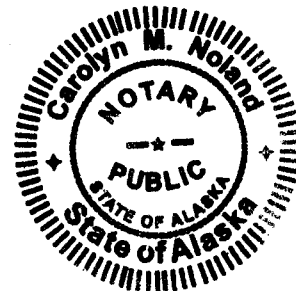
I, Nita J. Bolz, after being first duly sworn, depose and state as follows:

- (1) I am a Forensic Scientist IV at the State of Alaska Scientific Crime Detection Laboratory.
- (2) The Alaska Scientific Crime Detection Laboratory is an entity within the Department of Public Safety.
- (3) I am the Scientific Director of the State Breath Alcohol Program.
- (4) In that capacity, I am responsible for overseeing the breath alcohol program, including assuring that persons responsible for verifying the calibration of instruments are properly trained and qualified. I also am responsible for maintaining the records of the program.
- (5) The attached verification is a true and accurate verification of calibration that reflects a regularly conducted and regularly recorded activity of the breath alcohol program performed by a person trained and qualified to conduct the verification.
- (6) The referenced instrument is certified for evidentiary use in the State of Alaska.

[Signature]
Nita J. Bolz
Scientific Director
State Breath Alcohol Program

Subscribed and sworn before me this 15 day of Oct., 2009.

[Signature]
Carolyn M. Noland
Notary Public, State of Alaska
Commission Expires with Office
BT9 06/03



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(CONTINUED FROM FRONT PAGE)

C TAPE THE TEST STRIP FROM THE NONDRINKING SUBJECT TEST AND THE DIAGNOSTIC CHECK IN THE MARKED BOXES.

NONDRINKING SUBJECT TEST

ALASKA DEPARTMENT OF PUBLIC SAFETY
DATAMASTER cdm 130289

SEPTEMBER 04, 2009

OPERATOR'S NAME:
REDBURN BYRON D
OPERATOR'S NUMBER: 2087
SUBJECT'S LAST NAME:
VERIFICATION OF CAL
SUBJECT'S FIRST NAME/MI:

A
O.L. #: A
DEPT/AGENCY: ONE1
CASE/REPORT: A
TEST TYPE: V
ALCO TARGET VALUE: .079
ALCO S/N: X301548

--- BREATH ANALYSIS ---

.079 ADJUSTED FOR 30.40 in
ALCO TARGET .000 14:49
BLANK TEST .000 14:50
INTERNAL STANDARD VERIFIED 14:50
ALCO TV 30.40 in .078 14:50
BLANK TEST .000 14:51
SUBJECT SAMPLE .000 14:51
BLANK TEST .000 14:52
ALCO TV 30.40 in .078 14:53
BLANK TEST .000 14:53

DIAGNOSTIC CHECK

ALASKA DEPARTMENT OF PUBLIC SAFETY
DATAMASTER cdm 130289

SEPTEMBER 04, 2009
TIME 14:45

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY
PROGRAM: OKAY
SOFTWARE DATE: 02/20/01
HEATERS
SAMPLE CHAMBER: 49c
BREATH TUBE: 42c
BAROMETER: 30.40 in
FLOW DETECTOR: OKAY
PUMP
HIGH SPEED: OKAY
DETECTOR: OKAY
FILTERS: OKAY
QUARTZ STANDARD: OKAY
CALIBRATION: OKAY

PRINTER TEST

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H I J K L M N O P Q R S T U V W X Y Z [\] ^ _ ` a b c d e f g h i j k l m n o
p q r s t u v w x y z { | } ~